FINANCIAL STATEMENTS AND REPORT OF
INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS
HOSPITAL DISTRICT #1
OF CRAWFORD COUNTY, KANSAS
DECEMBER 31, 2018 AND 2017

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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

The Board of Trustees
Hospital District #1 of Crawford County, Kansas

We have audited the accompanying financial statements of the business-type activity of Hospital District #1 of Crawford County, Kansas (Hospital), as of and for the years ended December 31, 2018 and 2017, which collectively comprise the Hospital's basic financial statements as listed in the table of contents and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the Kansas Municipal Audit and Accounting Guide. These standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified audit opinion.

Basis for Qualified Opinion

The 2018 and 2017 financial statements referred to above do not include financial data of the Hospital District #1 Crawford County Foundation (Foundation), a component unit of the Hospital based on the nature and significance of the relationship between the Hospital and the Foundation. Although the Hospital does not have ownership of the assets of the Foundation, the financial data of the Foundation should be included in order to conform with accounting principles generally accepted in the United States of America. If the omitted component unit had been included for the years ended December 31, 2018 and 2017, the

component unit's assets and net assets would be approximately \$221,000 and \$230,000, respectively; and there would be a decrease in component unit net assets of approximately \$9,000 and an increase in component unit net assets of \$32,000 in 2018 and 2017, respectively.

Qualified Opinion

In our opinion, except for the effects on the financial statements of the omission described in the preceding paragraph, the financial statements referred to above present fairly, in all material respects, the financial position of the business-type activity of Hospital District #1 of Crawford County, Kansas, as of December 31, 2018 and 2017, and the changes in its net position and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Required Supplementary Information

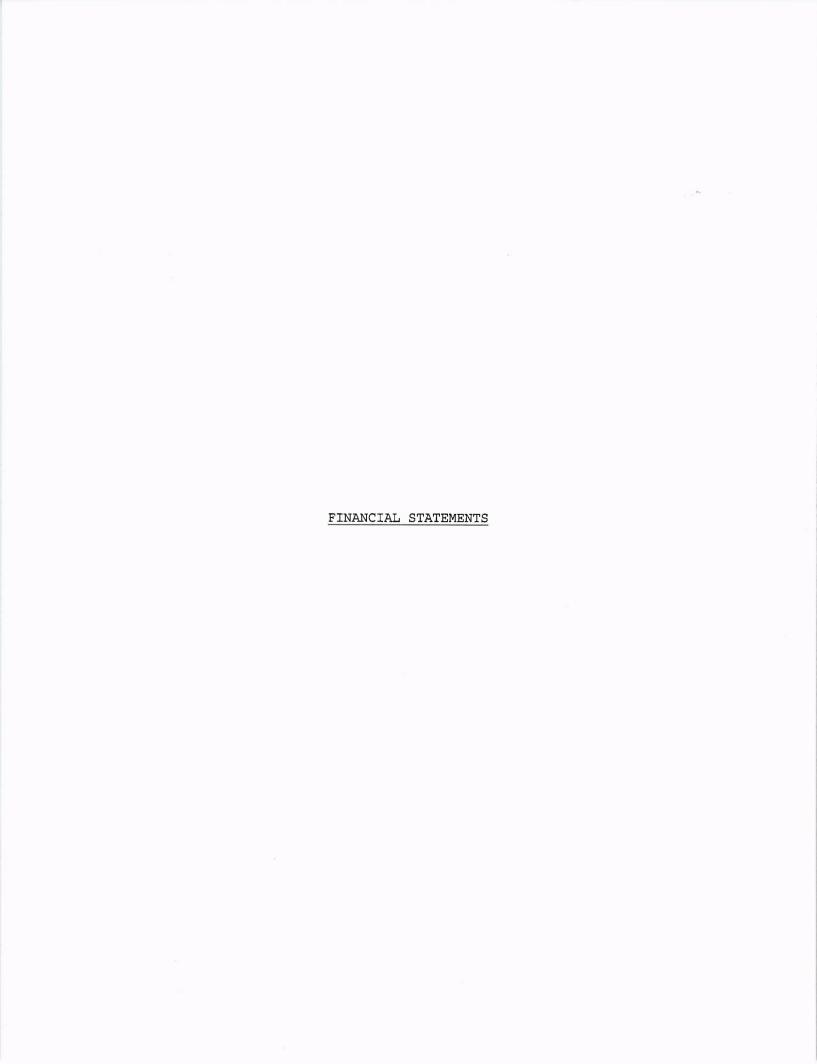
The Hospital has omitted a management's discussion and analysis that accounting principles generally accepted in the United States of America require to be presented to supplement the basic financial statements. Such missing information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. Our opinion on the basic financial statements is not affected by this missing information.

Other

Our audits were conducted for the purpose of forming an opinion on the financial statements that collectively comprise Hospital District #1 of Crawford County, Kansas, basic financial statements as a whole. The supplementary information presented on pages 19 through 23 is for purposes of additional analysis and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audits of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to underlying accounting and other records used to prepare the financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the basic financial statements as a whole, except that no opinion is expressed as to the adequacy of insurance coverage.

The statistical data shown on page 24 is presented solely as supplementary information. This data has been summarized from Hospital records and was not subjected to the audit procedures applied in the audit of the financial statements. Accordingly, we do not express an opinion on such data.

Wendling Nu Nelson 4 Johan 22C Topeka, Kansas March 29, 2019



HOSPITAL DISTRICT #1 OF CRAWFORD COUNTY, KANSAS STATEMENTS OF NET POSITION December 31,

ASSETS AND DEFERRED OUTFLOWS OF RESOURCES

	2018	2017
CURRENT ASSETS Cash and invested cash Patient accounts receivable, net of allowance for doubtful accounts of \$717,000 in 2018 and \$700,000 in	\$ 3,308,451	\$ 3,190,636
2017 (Note A4)	1,926,694	2,295,278
Accounts receivable - other Estimated settlements due from third-	224,411	240,952
party payors (Note B)	175,000	233,000
Inventories (Note A5)	445,893	478,822
Prepaid expenses Assets whose use is limited - required	378,191	355,303
for current liabilities (Note D)	310,746	98,520
Total current assets	6,769,386	6,892,511
ASSETS WHOSE USE IS LIMITED		
By Board of Trustees (Note C)	285,179	245,549
By donor for capital equipment (Note C)	975,000	975,000
By bond resolution (Note D)	1,125,338	902,520
Less amounts required for current	2,385,517	2,123,069
liabilities	310,746	98,520
Noncurrent assets whose use is limited	2,074,771	2,024,549
CAPITAL ASSETS, NET (Notes A6, E, F, and G)	7,620,120	8,566,465
OTHER ASSETS		
Other investments, at cost	35,100	35,100
Total assets	16,499,377	17,518,625
DEFERRED OUTFLOWS OF RESOURCES Deferred outflows on advance refunding	541,585	610,560
Total assets and deferred outflows of resources	\$17,040,962	\$18,129,185

LIABILITIES AND NET POSITION

	2018	2017
CURRENT LIABILITIES Current portion of capital lease obligations (Note F) Current portion of long-term debt (Note G) Accounts payable and other accrued liabilities Accrued payroll and related deductions Accrued paid time off (Note A10) Accrued interest payable	\$ 123,815 566,585 336,239 576,368 415,826 136,699	\$ 137,684 427,159 407,432 521,502 405,188 27,104
Total current liabilities	2,155,532	1,926,069
CAPITAL LEASE OBLIGATIONS, excluding current portion (Note F) LONG-TERM DEBT, less current portion	138,100	261,915
(Note G)	10,911,960	11,550,383
Total liabilities	13,205,592	_13,738,367
NET POSITION (Note A9) Invested in capital assets, net of related debt Restricted for capital equipment Restricted for debt service (Note D) Unrestricted Total net position	(4,120,339) 975,000 1,125,338 5,855,371 3,835,370	(3,810,675) 975,000 902,520 6,323,973 4,390,818
Total liabilities and net position	\$17,040,962	\$18,129,185

HOSPITAL DISTRICT #1 OF CRAWFORD COUNTY, KANSAS STATEMENTS OF REVENUE, EXPENSES, AND CHANGES IN NET POSITION Year ended December 31,

	2018	2017
Operating revenues Net patient service revenue Other	\$16,506,204 973,747	\$17,250,801 926,642
Total operating revenues	17,479,951	18,177,443
Operating expenses Salaries and wages Employee benefits Purchased services and professional fees Leases and rentals Other supplies and expenses Depreciation and amortization	9,280,925 2,202,573 1,715,031 164,908 3,313,745 1,345,260	9,463,944 2,251,014 1,749,476 166,727 3,351,423 1,462,646
Total operating expenses	18,022,442	18,445,230
Operating loss	(542,491)	(267,787)
Nonoperating revenues (expenses) Investment income Noncapital contributions Ad valorem taxes Interest expense Gain (loss) on disposal of capital assets	58,999 318,589 (453,638) ———710	41,242 600 201,636 (806,688) (14,915)
Nonoperating revenues (expenses), net	(75,340)	(578,125)
Expenses in excess of revenues before capital contributions Capital contributions	(617,831) 62,383	(845,912) 22,383
Decrease in net position Net position at beginning of year	(555,448) 4,390,818	(823,529) 5,214,347
Net position at end of year	\$ 3,835,370	\$ 4,390,818

HOSPITAL DISTRICT #1 OF CRAWFORD COUNTY, KANSAS STATEMENTS OF CASH FLOWS

Year ended December 31,

	2018	2017
Cash flows from operating activities Receipts from and on behalf of patients Payments to or on behalf of employees Payments for supplies and services Other receipts and payments	\$16,932,788 (11,417,994) (5,254,836) 990,288	\$17,407,761 (11,754,910) (5,274,725) 888,420
Net cash provided by operating activities	1,250,246	1,266,546
Cash flows from noncapital financing activities Ad valorem taxes Noncapital contributions	318,589	201,636
Net cash provided by noncapital financing activities	318,589	202,236
Cash flows from capital and related financing activities Purchases of capital assets Proceeds from disposals of equipment Repayments on capital lease obligations Repayment of long-term debt Proceeds from issuance of long-term debt Receipt of contributions restricted for capital assets Payment of bond issuance costs Interest paid on long-term debt	(398,915) 710 (137,684) (427,159) 62,383 (346,906)	(376,309) 50 (204,386) (8,984,980) 8,775,000 22,383 (219,511) (548,081)
Net cash used by capital and related financing activities	(1,247,571)	(1,535,834)
Cash flows from investing activities Investment income	58,999	41,242
Net cash provided (used) by investing activities	58,999	41,242
Change in cash and cash equivalents Cash and cash equivalents at beginning of year	380,263 5,313,705	(25,810) 5,339,515
Cash and cash equivalents at end of year	\$ 5,693,968	\$ 5,313,705
Reconciliation of cash and cash equivalents Cash and cash equivalents Cash included in assets whose use is limited	\$ 3,308,451 2,385,517	\$ 3,190,636 2,123,069
	\$ 5,693,968	\$ 5,313,705

HOSPITAL DISTRICT #1 OF CRAWFORD COUNTY, KANSAS STATEMENTS OF CASH FLOWS - CONTINUED Year ended December 31,

	2018	2017
Reconciliation of operating loss to net cash provided by operating activities Operating loss Adjustments to reconcile operating loss to net cash provided by operating activities	\$ (542,491)	\$ (267,787)
Depreciation and amortization	1,345,260	1,462,646
Provision for bad debts	1,132,253	1,143,509
Changes in		
Patient receivables	(763,669)	(1,186,549)
Other receivables	16,541	(38,222)
Estimated settlements due to/from		
third-party payors	58,000	200,000
Inventories	32,929	(6,028)
Prepaid expenses	(22,888)	15,128
Accounts payable and accrued expenses	(71,193)	(16,199)
Accrued payroll and related deductions	54,866	14,079
Accrued paid time off	10,638	(54,031)
Net cash provided by operating activities	\$ 1,250,246	\$ 1,266,546

December 31, 2018 and 2017

NOTE A - SUMMARY OF ACCOUNTING POLICIES

A summary of the significant accounting policies of Hospital District #1 of Crawford County, Kansas, consistently applied in the preparation of the accompanying financial statements follows.

1. Financial reporting entity

Hospital District #1 of Crawford County, Kansas (Hospital), is a municipal corporation operating an acute-care hospital located in Girard, Kansas, with a licensed bed capacity of 25 acute-care beds and 10 geriatric psych beds. The Hospital also provides outpatient and home health service to the community and surrounding areas. The Hospital is governed by an elected five-member Board of Trustees.

2. Basis of accounting

The Hospital uses enterprise fund accounting whereby revenues and expenses are recognized on the accrual basis using the economic resources measurement focus.

3. Use of estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from these estimates.

4. Patient accounts receivable

The Hospital reports patient accounts receivable for services rendered at net realizable amounts from third-party payors, patients, and others. The Hospital provides an allowance for uncollectible accounts based upon a review of outstanding receivables, historical collection information, and existing economic conditions.

5. Inventories

Inventories are stated at cost as determined using the average cost method.

6. Capital assets

Capital asset acquisitions in excess of \$5,000 (including assets recorded as capital leases) are capitalized and stated at cost. Depreciation and amortization of capital assets are provided on the straight-line method over the estimated useful lives of the assets. The estimated lives used are generally in accordance with the guidelines established by the American Hospital Association.

The costs of maintenance and repairs are charged to operating expenses as incurred. The costs of significant additions, renewals, and betterments to depreciable properties are capitalized and depreciated over the remaining or extended estimated useful lives of the item or the properties. Gains and losses on disposition of capital assets are included in nonoperating revenues and expenses.

December 31, 2018 and 2017

NOTE A - SUMMARY OF ACCOUNTING POLICIES - Continued

7. Costs of borrowing

Original issue premiums and discounts and deferred outflows on advance refunding associated with issuance of long-term debt are amortized using the principal outstanding method over the term of the related debt.

8. Deferred outflows of resources

Deferred outflows of resources represent a consumption of net position that applies to a future period and so will not be recognized as an expense or expenditure until then.

9. Net position

The net position of the Hospital is presented in the following four components:

- Invested in capital assets, net of related debt consists of capital assets net of accumulated depreciation and reduced by the balances of any outstanding borrowings used to finance the purchase or construction of those assets.
- Restricted for debt service Restricted net position is noncapital net position that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the Hospital.
- Restricted expendable net position Restricted expendable net position is noncapital net position that must be used for the purchase of capital assets in accordance with donor restrictions.
- Unrestricted Unrestricted net position is the remaining net position that does not meet the definitions of the other three components of net position.

10. Compensated absences

Hospital policies permit most employees to accumulate benefits (including paid time away from work to use for personal business, vacation, illness, and holidays) that may be realized as paid time off or, in limited circumstances, as a cash payment. Expense and the related liability are recognized as benefits earned whether the employee is expected to realize the benefit as time off or in cash. Compensated absence liabilities are computed using the regular pay and termination pay rates in effect at the statement of net position date plus an additional amount for compensation-related payments such as social security and Medicare taxes computed using rates in effect at that date.

11. Operating revenues and expenses

The Hospital's statement of revenues, expenses, and changes in net position distinguishes between operating and nonoperating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services, the Hospital's principal activity. Nonexchange revenues, including grants and contributions received for purposes other than capital asset acquisition, are reported as nonoperating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

December 31, 2018 and 2017

NOTE A - SUMMARY OF ACCOUNTING POLICIES - Continued

12. Net patient service revenue

Net patient service revenue is reported at established charges with deductions for discounts, the provision for bad debts, and contractual adjustments, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

13. Charity care

The Hospital provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Because the Hospital does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue. The amount of charity care provided by the Hospital is disclosed in Note B.

14. Ad valorem taxes

The Hospital receives financial support from ad valorem taxes. The ad valorem taxes are used for the purchase of capital assets. Ad valorem taxes are assessed in November of each year and are available for use by the Hospital in the following year.

15. Income taxes

The Hospital is classified as a political subdivision and is under Section 115 of the Internal Revenue Code and is exempt from federal taxes on related income pursuant to Section 115 and is not required to file federal income tax returns.

16. Cash and cash equivalents

The Hospital considers all cash and invested cash, including any amounts included in assets whose use is limited, to be cash equivalents for the purposes of the cash flow statement. Comparative financial statements of the prior year have been restated to reflect this change. This restatement had no effect on previously reported net position or change in net position.

NOTE B - REIMBURSEMENT PROGRAMS

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established charge rates. The amounts reported on the statements of net position as estimated third-party payors settlements consist of management's estimate of the differences between the contractual amounts for providing covered services and the interim payments received for those services. A summary of the payment arrangements with major third-party payors follows:

Medicare - Inpatient and outpatient acute care services and skilled nursing swing-bed services rendered to Medicare program beneficiaries are paid under the provisions applicable to critical access hospitals. Inpatient geriatric psychology services are paid based on prospectively determined per diem rates. Home health and other physician services rendered to Medicare beneficiaries are paid based on prospectively determined rates.

December 31, 2018 and 2017

NOTE B - REIMBURSEMENT PROGRAMS - Continued

The Hospital is paid for cost reimbursable items at a tentative rate with the final settlement determined after submission of annual cost reports by the Hospital and audits or reviews thereof by the Medicare administrative contractor. The Hospital's classification of patients under the Medicare program and the appropriateness of their admission are subject to an independent review by a peer review organization. The Hospital's Medicare cost reports have been audited or reviewed by the Medicare administrative contractor through December 31, 2016.

Medicaid - Services rendered to Medicaid program beneficiaries are paid at prospectively determined rates. These rates vary according to a patient classification system that is based on clinical, diagnostic, and other factors. The Hospital receives a hospital-specific add-on percentage to each claim based on previously filed cost reports.

Blue Cross and Blue Shield - All services rendered to patients who are insured by Blue Cross-Blue Shield are paid on the basis of prospectively determined rates per discharge or discounts from established charges.

Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates could change by a material amount in the near term.

A summary of gross and net patient service revenue follows:

	2018	2017
Gross patient service revenue Adjustments to patient service revenue Third-party contractual adjustments,	\$32,018,280	\$33,705,072
discounts, and allowances	(14,297,663)	(15,197,104)
Provision for bad debts	(1,132,253)	(1,143,509)
Charity care	(82,160)	(113,658)
Net patient service revenue	\$16,506,204	\$17,250,801

The Hospital maintains records to identify and monitor the level of charity care it provides. The amount of charges foregone for services and supplies furnished under its charity care policy for 2018 and 2017, was \$82,160 and \$113,658, respectively. The Hospital estimates that the cost of providing charity care, based on overall cost-to-charge ratios obtained from the Hospital's cost reports, was \$43,993 and \$59,791 for 2018 and 2017, respectively.

The American Recovery and Reinvestment Act of 2009 (ARRA) provides for incentive payments under the Medicare and Medicaid programs for certain hospitals and physician practices that demonstrate meaningful use of certified electronic health record (EHR) technology. These provisions of ARRA are intended to promote the adoption and meaningful use of interoperable health information technology and qualified EHR technology.

The Hospital recognizes revenue for EHR incentives when it has reasonable assurance that it has demonstrated meaningful use of certified EHR technology for the applicable period and complied with the reporting conditions to receive the payment. The demonstration of meaningful use is based upon meeting a series of objectives and varies between hospital facilities and physician practices and between the Medicare and Medicaid programs.

December 31, 2018 and 2017

NOTE B - REIMBURSEMENT PROGRAMS - Continued

Additionally, meeting the objectives in order to demonstrate meaningful use becomes progressively more stringent as its implementation is phased in through stages as outlined by Centers for Medicare & Medicaid Services. The Hospital recognized \$103,388 and \$172,313 of revenue from Medicaid related to EHR incentives in 2018 and 2017, respectively. This amount is included with other operating revenues on the statement of revenue, expenses, and changes in net position.

The Hospital incurs both capital expenditures and operating expenses in connection with the implementation of its EHR initiatives. The amounts and timing of these expenditures do not directly correlate with the timing of the Hospital's recognition of EHR incentives as revenue.

NOTE C - ASSETS WHOSE USE IS LIMITED BY BOARD OF TRUSTEES AND DONORS

Assets whose use is limited by Board of Trustees and donors consist of invested cash and certificates of deposit which are to be used for replacement of capital assets or for the purchase of additional capital assets. The funds designated by the Board may be used for other purposes by action of the Board of Trustees.

NOTE D - ASSETS WHOSE USE IS LIMITED BY BOND RESOLUTION

Assets whose use is limited by bond resolution at December 31, 2018 and 2017, consist of required accounts to be maintained by the Hospital under the terms of the Crawford County, Kansas Public Building Commission Refunding Revenue Bonds, Series 2016 and Refunding Revenue Bonds, Series 2017, resolutions (see Note G).

Funds held in these accounts consist of invested cash and are summarized as follows:

	2018	2017
Debt service account - Series 2016 and 2017 Debt service reserve fund - Series 2017 Cost of issuance fund - Series 2017	\$ 310,746 814,592	\$ 46,713 804,000 51,807
	1,125,338	902,520
Less amounts required for current liabilities	310,746	98,520
	\$ 814,592	\$ 804,000

Under the terms of the Series 2017 bond resolution, the debt service account is to be used for payment of principal and interest on the bonds. The debt service reserve account is to be used to prevent any default in the payment of principal and interest on the bonds.

NOTE E - CAPITAL ASSETS

Hospital capital asset additions, retirements, and balances are as follows:

		20	18	
	Beginning	Additions/		Ending
	<u>balance</u>	transfers	Retirements	<u>balance</u>
Land and land improvements	\$ 870,184	\$ 34,883	\$ -	\$ 905,067
Buildings	9,994,156			9,994,156
Fixed equipment	7,181,773			7,181,773
Major movable equipment	6,937,788	457,707	(7,760)	7,387,735
Leasehold improvements	133,366			133,366
Projects in progress	93,675	(93,675)		
Totals at				
historical cost	25,210,942	398,915	(7,760)	25,602,097
Less accumulated				
depreciation and				
amortization				
Buildings	6,528,716	481,508		7,010,224
Fixed equipment	3,841,387	341,790		4,183,177
Major movable equipment	5,654,355	490,531	7,760	6,137,126
Leasehold improvements	620,019	31,431		651,450
-	16 644 477	1 245 262	7.760	15 001 055
	16,644,477	1,345,260	7,760	17,981,977
Capital assets, net	\$ 8,566,465	\$ (946,345)	\$ -	\$ 7,620,120
		20	17	
	Beginning		17	Ending
	Beginning balance	Additions/		Ending balance
	Beginning balance		17 Retirements	Ending balance
Land and improvements		Additions/		_
Land and improvements Buildings	balance	Additions/ transfers	Retirements	<u>balance</u>
Buildings Fixed equipment	balance \$ 907,673 10,067,238 7,207,675	Additions/ transfers \$ - 9,575	Retirements \$ (37,489) (73,082) (35,477)	\$ 870,184 9,994,156 7,181,773
Buildings Fixed equipment Major movable equipment	\$ 907,673 10,067,238 7,207,675 7,806,630	Additions/ transfers \$	Retirements \$ (37,489) (73,082)	\$ 870,184 9,994,156 7,181,773 6,937,788
Buildings Fixed equipment Major movable equipment Leasehold improvements	\$ 907,673 10,067,238 7,207,675 7,806,630 133,366	Additions/ transfers \$ - 9,575 156,187	Retirements \$ (37,489) (73,082) (35,477)	\$ 870,184 9,994,156 7,181,773 6,937,788 133,366
Buildings Fixed equipment Major movable equipment	\$ 907,673 10,067,238 7,207,675 7,806,630	Additions/ transfers \$ - 9,575	Retirements \$ (37,489) (73,082) (35,477)	\$ 870,184 9,994,156 7,181,773 6,937,788
Buildings Fixed equipment Major movable equipment Leasehold improvements	\$ 907,673 10,067,238 7,207,675 7,806,630 133,366	Additions/ transfers \$ - 9,575 156,187	Retirements \$ (37,489) (73,082) (35,477)	\$ 870,184 9,994,156 7,181,773 6,937,788 133,366 93,675
Buildings Fixed equipment Major movable equipment Leasehold improvements Projects in progress	\$ 907,673 10,067,238 7,207,675 7,806,630 133,366	Additions/ transfers \$ - 9,575 156,187	Retirements \$ (37,489) (73,082) (35,477)	\$ 870,184 9,994,156 7,181,773 6,937,788 133,366
Buildings Fixed equipment Major movable equipment Leasehold improvements Projects in progress Totals at	\$ 907,673 10,067,238 7,207,675 7,806,630 133,366 66,781	Additions/ transfers \$ - 9,575 156,187 26,894	Retirements \$ (37,489) (73,082) (35,477) (1,025,029)	\$ 870,184 9,994,156 7,181,773 6,937,788 133,366 93,675
Buildings Fixed equipment Major movable equipment Leasehold improvements Projects in progress Totals at historical cost	\$ 907,673 10,067,238 7,207,675 7,806,630 133,366 66,781	Additions/ transfers \$ - 9,575 156,187 26,894	Retirements \$ (37,489) (73,082) (35,477) (1,025,029)	\$ 870,184 9,994,156 7,181,773 6,937,788 133,366 93,675
Buildings Fixed equipment Major movable equipment Leasehold improvements Projects in progress Totals at historical cost Less accumulated	\$ 907,673 10,067,238 7,207,675 7,806,630 133,366 66,781	Additions/ transfers \$ - 9,575 156,187 26,894	Retirements \$ (37,489) (73,082) (35,477) (1,025,029) (1,171,077)	\$ 870,184 9,994,156 7,181,773 6,937,788 133,366 93,675
Buildings Fixed equipment Major movable equipment Leasehold improvements Projects in progress Totals at historical cost Less accumulated depreciation and amortization Buildings	\$ 907,673 10,067,238 7,207,675 7,806,630 133,366 66,781 26,189,363	Additions/ transfers \$ - 9,575 156,187 26,894 192,656	Retirements \$ (37,489) (73,082) (35,477) (1,025,029) (1,171,077)	\$ 870,184 9,994,156 7,181,773 6,937,788 133,366 93,675 25,210,942
Buildings Fixed equipment Major movable equipment Leasehold improvements Projects in progress Totals at historical cost Less accumulated depreciation and amortization Buildings Fixed equipment	\$ 907,673 10,067,238 7,207,675 7,806,630 133,366 66,781 26,189,363	Additions/ transfers \$ - 9,575 156,187 26,894 192,656	Retirements \$ (37,489) (73,082) (35,477) (1,025,029) (1,171,077) 72,368 38,131	\$ 870,184 9,994,156 7,181,773 6,937,788 133,366 93,675 25,210,942
Buildings Fixed equipment Major movable equipment Leasehold improvements Projects in progress Totals at historical cost Less accumulated depreciation and amortization Buildings Fixed equipment Major movable equipment	\$ 907,673 10,067,238 7,207,675 7,806,630 133,366 66,781 26,189,363	Additions/ transfers \$ - 9,575 156,187 26,894 192,656 507,741 351,052 553,002	Retirements \$ (37,489) (73,082) (35,477) (1,025,029) (1,171,077) 72,368 38,131 1,010,779	\$ 870,184 9,994,156 7,181,773 6,937,788 133,366 93,675 25,210,942 6,528,716 3,841,387 5,654,355
Buildings Fixed equipment Major movable equipment Leasehold improvements Projects in progress Totals at historical cost Less accumulated depreciation and amortization Buildings Fixed equipment	\$ 907,673 10,067,238 7,207,675 7,806,630 133,366 66,781 26,189,363	Additions/ transfers \$ - 9,575 156,187 26,894 192,656	Retirements \$ (37,489) (73,082) (35,477) (1,025,029) (1,171,077) 72,368 38,131	\$ 870,184 9,994,156 7,181,773 6,937,788 133,366 93,675 25,210,942 6,528,716 3,841,387 5,654,355 620,019
Buildings Fixed equipment Major movable equipment Leasehold improvements Projects in progress Totals at historical cost Less accumulated depreciation and amortization Buildings Fixed equipment Major movable equipment	\$ 907,673 10,067,238 7,207,675 7,806,630 133,366 66,781 26,189,363	Additions/ transfers \$ - 9,575 156,187 26,894 192,656 507,741 351,052 553,002	Retirements \$ (37,489) (73,082) (35,477) (1,025,029) (1,171,077) 72,368 38,131 1,010,779	\$ 870,184 9,994,156 7,181,773 6,937,788 133,366 93,675 25,210,942 6,528,716 3,841,387 5,654,355

NOTE F - LEASES

The Hospital leases certain property and equipment under long-term lease arrangements. Capital assets and accumulated depreciation and amortization include the following amounts for leases that have been capitalized:

	\$ 336,011
and amortization	 313,818
Capital assets Less accumulated depreciation	\$ 649,829
	2018

The following is a schedule of future minimum lease payments under capital leases:

	<u>Principal</u>	<u>Interest</u>	<u>Total</u>
2019 2020 2021	\$ 123,815 128,079 10,021	\$ 6,967 2,703 28	\$ 130,782 130,782 10,049
Less interest	\$ 261,915	\$ 9,698	271,613 9,698
Less current portion			261,915 123,815
			\$ 138,100

The following is a summary of changes in capital lease obligations:

Principal outstanding at January 1, 2017 2017 Payments on capital lease obligations	\$	603,985 (204,386)
Principal outstanding at December 31, 2017 2018 Payments on capital lease obligations	·	399,599 (137,684)
Principal outstanding at December 31, 2018	\$	261,915

Leases that do not meet the criteria for capitalization are classified as operating leases with related rentals charged to operations as incurred. Total rental expense under operating leases in 2018 and 2017, was approximately \$165,000 and \$167,000, respectively.

The following is a schedule by year of future minimum lease payments under operating leases as of December 31, 2018, that have initial or remaining lease terms in excess of one year:

	\$ 206,056
2021	 15,420
2020	92,520
2019	\$ 98,116

NOTE G - LONG-TERM DEBT

Hospital long-term debt consists of the following:

	2018		2017
0% Note payable to Heartland Rural Electric Coop, issued in September 2009, in the original amount of \$600,000, with an administrative fee of 1% of the unpaid balance due annually starting at the inception of the note due to Heartland Rural Electric Coop, and an administrative fee of 1% of the unpaid principal balance due annually starting at the inception of the note due to a local bank, monthly principal payments of \$5,556 through August 30, 2019	\$ 44	,444 \$	111,111
Crawford County, Kansas Public Building Commission Refunding Revenue Bonds, Series 2016, issued on March 30, 2016, in the original amount of \$2,605,000, variable interest rate of 2.93%	2,400	, 039	2,455,532
Crawford County, Kansas Public Building Commission Refunding Revenue Bonds, Series 2017, issued on December 28, 2017, in the original amount of \$8,775,000, interest rate of 4.00%	8,470	.000	8,775,000
	10,914	, 483 1	1,341,643
Net unamortized bond premium Less current maturities		.062 .585)	635,899 (427,159)
	\$10,911	960 \$1	1,550,383

The Series 2016 refunding revenue bonds were issued for the purpose of refunding the Series 2009B bonds. The Series 2016 refunding revenue bonds are due in annual installments of varying amounts with final maturity on September 1, 2034. Interest is payable on September 1 of each year. The initial interest rate on the Series 2016 bonds is 2.93 percent. The rate will be adjusted on September 1, 2025, to the daily yield on 10-year U.S. Treasury obligations, plus 100 basis points, provided that such rate shall not exceed the maximum legal limit for interest rates under K.S.A. 10-1009, as amended.

On December 28, 2017, the Crawford County, Kansas Public Building Commission issued \$8,775,000 in Refunding Revenue Bonds, Series 2017, (the 2017 bonds) on behalf of the Hospital. The proceeds of the 2017 bonds were used to (1) pay the costs related to issuance of the 2017 bonds, and (2) advance refund \$8,540,000 of the 2009-A bonds maturing during the years from 2018 through 2032 by making an irrevocable deposit with a trustee. The trustee used that deposit to purchase direct obligations of the United States of America that will mature and pay interest in amounts and at times that will provide for payment of interest on the refunded 2009-A bonds through September 1, 2019, and to redeem and pay the \$8,540,000 of refunded 2009-A bonds on that date at redemption prices of 100 percent and 102 percent.

NOTE G - LONG-TERM DEBT - Continued

The refunding transaction decreased the total amount of future debt service requirements by \$720,465. This resulted in an economic gain of \$639,730. As a result of the transaction, a deferred refunding loss of \$610,560 was recognized for the difference between the book value of the refunded debt and the amount required to extinguish the debt. This deferred loss is reported as a deferred outflow of resources on the statement of net position.

The following is a schedule of future maturities of long-term debt:

	Principal	Interest	<u>Total</u>
2019	\$ 566,585	\$ 410,987	\$ 977,572
2020	538,648	389,991	928,639
2021	560,581	368,858	929,439
2022	582,381	347,058	929,439
2023	604,234	324,405	928,639
2024 - 2028	3,405,611	1,249,784	4,655,395
2029 - 2033	3,932,796	532,706	4,465,502
2034	723,647	21,497	745,144
	\$10,914,483	\$ 3,645,286	\$14,559,769
The following is a summary	of changes in lo	ong-term debt:	

Principal outstanding at January 1, 2017 2017 payments on long-term debt 2017 long-term debt obligations incurred	\$ 11,622,201 (9,055,558) 8,775,000
Principal outstanding at December 31, 2017 2018 payments on long-term debt	11,341,643 (427,160)
Principal outstanding at December 31, 2018	\$10,914,483

The provisions of the 2016 and 2017 Bond Indentures contain covenants which, among other things, require the segregation of funds for payment of principal and interest on the bonds (see Note D) and require the establishment and maintenance of charge rates for Hospital services at such levels so that net revenues available for debt service of the Hospital will not be less than 115 percent of the annual debt service requirements on the Hospital's parity debt obligations.

NOTE H - LINE OF CREDIT

The Hospital has a \$44,444 available line of credit at December 31, 2018, with a local bank in connection with the Heartland Rural Electric Coop note payable (see Note G). No amounts have been drawn against this line of credit as of December 31, 2018.

NOTE I - RISK MANAGEMENT

The Hospital is insured for professional liability under a comprehensive hospital liability policy provided by an independent insurance carrier with limits of \$200,000 per occurrence up to an annual aggregate of \$600,000 for all claims made during the policy year. The Hospital is further covered by the Kansas Health Care Stabilization Fund for claims in excess of its comprehensive hospital liability policy up to \$800,000 pursuant to any one

December 31, 2018 and 2017

NOTE I - RISK MANAGEMENT - Continued

judgment or settlement against the Hospital for any one party, subject to an aggregate limitation for all judgments or settlements arising from all claims made in the policy year in the amount of \$2,400,000. All coverage is on a claims-made basis. The above policies are renewed through March 27, 2019. The Hospital intends to renew this coverage on that date and is aware of no reason why such coverage would be denied at that time.

In addition to the risk disclosed elsewhere in these financial statements and notes thereto, the Hospital is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors and omissions; injuries to employees; and natural disasters. The Hospital purchases commercial insurance for these risks.

NOTE J - DEPOSITS WITH FINANCIAL INSTITUTIONS

Kansas statutes authorize the Hospital, with certain restrictions, to deposit or invest in open accounts, time deposits, certificates of deposit, repurchase agreements, the State Treasurer's municipal investment pool, and U.S. Treasury bills and notes. Also, statutes generally require that financial institutions pledge securities with a market value equal to total deposits, except for monies acquired through the receipt of grants, donations, bequests, and gifts, in excess of F.D.I.C. coverage at any given time and the securities pledged be deposited with a Kansas state or national bank or trust company, the Federal Reserve Bank, the Federal Home Loan Bank, or the Kansas State Treasurer.

The carrying amount of the Hospital's deposits with financial institutions was \$4,877,801 and the bank balances were \$4,992,481 at December 31, 2018. The bank balances are categorized as follows at December 31, 2018:

Amount insured by the F.D.I.C., or collateralized with
the Hospital's name \$ 908,137

Uncollateralized (amount collateralized with securities
held in safekeeping by an authorized depository other
than the pledging financial institution's trust
department, but not in the Hospital's name) 4,084,344

\$ 4,992,481

NOTE K - DEFINED CONTRIBUTION PENSION PLAN

The Hospital sponsors a defined contribution pension plan that provides pension benefits for substantially all of its employees. In a defined contribution plan, benefits depend solely on amounts contributed to the plan plus investment earnings. The plan is administered by a third-party insurance company and can be amended by the Board of Trustees. The Hospital matched employee contributions up to 4 percent of compensation excluding bonuses until July 1, 2017. Effective July 1, 2017, the Hospital matched employee contributions up to 3 percent of eligible employee compensation. The employees can contribute up to the maximum allowed by the Internal Revenue Service. The employees are fully vested in Hospital contributions after five years of service.

December 31, 2018 and 2017

NOTE K - DEFINED CONTRIBUTION PENSION PLAN - Continued

For the years ended December 31, 2018 and 2017, the Hospital and covered employees made contributions to the plan as follows:

	2018	2017
Hospital contributions	\$ 150,688	\$ 179,944
Employee contributions	405,584	401,546

NOTE L - BUDGETARY COMPARISON

The Hospital legally adopted a budget for capital fund expenditures for the years ended December 31, 2018 and 2017. Actual capital fund expenditures for the year ended December 31, 2018, were \$398,915 as compared to the legally adopted budgeted expenditures of \$405,000. Actual capital fund expenditures for the year ended December 31, 2017, were \$192,656 as compared to the legally adopted budgeted expenditures of \$368,403.

NOTE M - RELATED PARTY TRANSACTIONS

Hospital District #1 Crawford County Foundation (Foundation) was established in September 1999. The Foundation's Articles of Incorporation provide that its funds are for the benefit of the Hospital. The Foundation donated \$58,207 and \$25,266 in capital contributions to the Hospital during the years ended December 31, 2018 and 2017, respectively.

The Hospital participates in the 340(B) outpatient drug program. One of the pharmacies that the Hospital utilizes for the program is owned by a member of the Hospital's Board of Trustees. Approximately \$57,000 and \$157,000 was recognized as expense related to pharmacy services provided by the pharmacy in 2018 and 2017, respectively.

NOTE N - SUBSEQUENT EVENTS

The Hospital has evaluated subsequent events through the date of the independent certified public accountants' report, which is the date the financial statements were available to be issued.

SUPPLEMENTARY INFORMATION

HOSPITAL DISTRICT #1 OF CRAWFORD COUNTY, KANSAS NET PATIENT SERVICE REVENUE

		2018		2017
	Inpatient	Outpatient	Total	Total
Acute care room	\$ 730,181	\$ 445,524	\$ 1,175,705	\$ 1,202,920
Swing-bed room	222,060		222,060	251,803
Intensive care room	162,708		162,708	176,588
Geriatric psych	2,739,755	206,820	2,946,575	3,411,572
Operating room	730,786	2,303,393	3,034,179	3,210,911
Orthopedic		171,218	171,218	189,713
Anesthesiology	112,656	443,806	556,462	505,714
Radiology	416,297	5,292,602	5,708,899	5,851,704
Laboratory	669,268	5,040,781	5,710,049	5,880,610
Respiratory therapy	43,173	48,134	91,307	141,049
Physical therapy	203,752	924,918	1,128,670	1,158,011
Occupational therapy	135,761	252,132	387,893	400,393
Speech therapy	11,239	8,617	19,856	28,941
Pulmonary Rehab		160,221	160,221	210,082
Medical supplies	207,998	340,379	548,377	559,884
Pharmacy	1,391,266	1,240,638	2,631,904	2,887,598
Electrocardiology	70,738	918,384	989,122	788,287
Emergency room	2,696	2,517,066	2,519,762	2,517,938
Home health		596,847	596,847	678,436
Physician clinics	413,032	2,809,477	3,222,509	3,617,453
Community outreach		33,957	33,957	35,465
Gross patient service revenue	\$ 8,263,366	\$ 23,754,914	32,018,280	33,705,072
Contractual adjustments, discounts, and allowances				
Medicare			(7,357,568)	(8,067,726)
Medicaid			(2,482,538)	(2,321,073)
Blue Cross			(2,721,132)	(3,068,735)
Other			(1,736,425)	(1,739,570)
Provision for bad debts			(1,132,253)	(1,143,509)
Charity care			(82,160)	(113,658)
Net patient service revenue			\$ 16,506,204	\$17,250,801

HOSPITAL DISTRICT #1 OF CRAWFORD COUNTY, KANSAS

OTHER REVENUE

		2018	2017
Clinic rental Cafeteria sales Grants received 340(B) drug program EHR incentives Other	\$	3,800 28,959 8,032 808,917 103,388 20,651	\$ 5,160 37,134 16,008 690,213 172,313 5,814
	\$	973,747	\$ 926,642

HOSPITAL DISTRICT #1 OF CRAWFORD COUNTY, KANSAS OPERATING EXPENSES

		2018		2017
	Salaries	Other	Total	Total
Nursing service	\$ 343,330	\$ 53,486	\$ 396,816	\$ 377,698
Intensive care	264,909	8,239	273,148	247,207
Swing-bed	65	1,313	1,378	4,540
Geriatric psych	884,887	339,388	1,224,275	1,246,847
Operating room	341,337	83,758	425,095	414,068
Orthopedic	513,930	45,856	559,786	599,852
Anesthesiology		354,235	354,235	358,008
Radiology	314,212	313,000	627,212	627,940
Laboratory	486,378	481,919	968,297	959,941
Respiratory therapy	49,740	7,674	57,414	75,297
Physical therapy	256,905	7,660	264,565	289,213
Occupational therapy	121,864	1,870	123,734	116,829
Speech therapy		11,830	11,830	13,318
Pulmonary Rehab	194,135	5,173	199,308	133,826
Central supply	67,478	624,616	692,094	665,026
Pharmacy	222,341	617,929	840,270	999,730
Emergency room	1,006,364	55,773	1,062,137	1,051,923
Home health	297,295	12,729	310,024	327,454
Physician clinics	2,149,745	504,974	2,654,719	2,725,000
Depreciation and amortization		1,345,260	1,345,260	1,462,646
Employee benefits		2,202,573	2,202,573	2,251,014
Administrative and general	1,022,355	894,081	1,916,436	1,887,961
Plant operation and				
maintenance	134,310	442,032	576,342	572,198
Laundry and linen		56,850	56,850	54,708
Housekeeping	174,619	73,657	248,276	250,828
Dietary	162,550	176,231	338,781	410,345
Nursing administration	113,085	1,502	114,587	135,720
Medical records	156,798	17,909	174,707	183,749
Community outreach	2,293		2,293	2,344
	\$ 9,280,925	\$ 8,741,517	\$18,022,442	\$18,445,230

HOSPITAL DISTRICT #1 OF CRAWFORD COUNTY, KANSAS BALANCE IN DEPOSITORY COMPARED WITH DEPOSITORY SECURITY December 31, 2018

	First National Bank of Girard	Girard National Bank	Community National Bank	Farmers National Bank
Bank balances, December 31, 2018 Less F.D.I.C coverage	\$3,149,920 250,000	\$1,434,424 250,000	\$ 208,137 208,137	\$ 200,000 200,000
Balance in excess of F.D.I.C. coverage	\$2,899,920	\$1,184,424	\$ -	\$ -
Market value of securities pledged	\$3,264,822	\$1,754,091	<u>\$</u>	<u>\$</u>

HOSPITAL DISTRICT #1 OF CRAWFORD COUNTY, KANSAS SUMMARY OF INSURANCE COVERAGE

December 31, 2018

Federal Insurance Company Policy No. 3585-70-69, expiring March 27, 2019 Property coverage Buildings and contents, \$5,000 deductible Blanket BPP, \$5,000 deductible Business interruption Computer malicious programming	\$23,506,248 6,641,275 15,000,000 100,000
Cincinnati Insurance Company Policy No. ENP 030 75 68, expiring March 27, 2021 Employee dishonesty-blanket, \$10,000 deductible Computer fraud, \$2,500 deductible Funds transfer fraud, \$2,500 deductible Forgery, \$10,000 deductible	500,000 200,000 200,000 200,000
Kansas Medical Mutual Insurance Company Policy No. HPL0015133, expiring March 27, 2019 Professional hospital liability Professional claims Kansas Healthcare Stabilization Fund coverage Additional insureds General liability Personal injury and property damage liability Employee benefits liability, \$1,000 deductible	200,000/600,000 800,000/2,400,000 1,000,000/3,000,000 1,000,000/3,000,000 250,000
Cincinnati Insurance Company Policy No. EMH 0433716, expiring March 27, 2019 Directors' and officers' liability and trustee and fiduciary liability, \$5,000 deductible Employment practices liability, \$10,000 deductible Internet security, \$100,000 deductible	1,000,000 1,000,000 1,000,000
KHA Workers' Compensation Fund, Inc. Certificate No. 83, expiring January 1, 2019 Workers compensation Per accident Per employee disease Policy limit employee disease	500,000 500,000 500,000
Cincinnati Insurance Company Policy No. EBA0115804, expiring October 28, 2019 Automobile liability, each accident Automobile uninsured motorist, each accident Automobile underinsured motorist, each accident	1,000,000 1,000,000 1,000,000

HOSPITAL DISTRICT #1 OF CRAWFORD COUNTY, KANSAS

STATISTICAL DATA

(Unaudited)

	2018	2017
Patient days Acute Swing-bed	768 412	822 466
Total inpatient	1,180	1,288
Geriatric psych	2,785	2,942
Outpatient visits	18,079	19,134
Discharges Acute Geriatric psych	256 253	258 226
Average length of stay Acute Geriatric psych	3.0 11.0	3.2 13.0
Beds Acute Geriatric psych	25 10	25 10
Occupancy percent inpatient Occupancy percent geriatric psych	12.93% 76.30%	14.12% 80.60%